



TEMPE NEIGHBORS HELPING NEIGHBORS

TNHN was formed to provide assistance to low income and frail Tempe residents who could not maintain or stay in their own homes without help. TNHN seeks to provide such residents with volunteers who will assist with yard and landscape maintenance, minor home repair and minor modifications. By providing assistance, volunteers will help residents maintain their home's appearance, safety, accessibility and quality of life.

A. **Purpose**

1. By assisting residents with yard and landscape maintenance, neighborhood blight and deterioration will be reduced while raising awareness of programs and services available. Residences will be brought up to code; homeowners will avoid being cited for violations and other legal enforcement actions.
2. Helping residents with minor home repairs to correct health and safety hazards or restore things to proper working order. Allowing elderly and low income to get minor home repairs for the cost of supplies only.
3. By making minor home modifications we increase the safety of the home living environment and increase the accessibility for the elderly homeowner to continue to live independently and accomplish tasks more easily.

B. **Activities**

Examples of work but not limited to; clean up and removal of debris around the home, free up painted windows, replace / clean filters, repair/clean gutters, fix/clean windows, repair steps and rails, install a grab bar, install smoke detectors, install/repair screens, repair holes in dry wall, secure loose interiors tiles, weatherization, caulking, replace/repair electrical outlets, faucets, light fixtures, deadbolts and locks and more.

C. **Support**

1. Tempe Neighbors helping Neighbors seeks to raise funds to support its efforts by soliciting donations in Arizona from the general public, corporate sponsors and charitable support organizations as well as grants from governmental and private sources.
2. TNHN seeks volunteers of all ages to share their various skills and talents to help with maintenance, minor home repair & modifications, fundraising and other areas of support.
3. TNHN seeks to work with local businesses for supplies and materials needed for maintenance, repair and modifications.

D. **Criteria**

1. Low income Tempe residents, over 65 years old or with a confirmed disability, meet income guidelines, only owner occupied dwellings. All utilities must be functioning. Resident is responsible for cost of supplies although assistance may be available if a need exists.



APPLICATION FOR SERVICE

TNHN Provides assistance to low income senior or disabled Tempe residents who are not able to maintain or stay in their homes without help. We provide volunteers to assist residents with yard clean ups, landscape maintenance, minor home repair and minor home modifications. By helping each other, we enhance our neighborhoods and improve the quality of life for our residents.

Criteria - Tempe Resident-Owner occupied-65 years or with a confirmed disability-Income at or below 150% of federal poverty levels-**no one living at residence capable of doing work requested**-all utilities functioning-resident will be responsible for costs of supplies*-We reserve the right to limit the number of requests per person/address per year .

NAME _____ DATE _____

DATE OF BIRTH ____/____/____ Check one M____ / F____ MARITAL STATUS _____

ADDRESS _____

PHONE _____ E-MAIL _____

List all people and ages living at above address: _____

In case of emergency Name: _____ Relationship: _____

Day Phone _____ Night Phone _____

Address _____ City _____ State _____ Zip _____

TOTAL MONTHLY INCOME: _\$ _____ AVERAGE MONTHLY EXPENSES: _\$ _____

Would you be willing to provide proof of income if requested? (W2, K1, 1099) YES / NO

- I do hereby certify and swear that the above information is true and correct and that the financial information represents my true financial conditions:
-

Signature _____ Date _____

ASSISTANCE_REQUESTED: _____

(* Assistance for costs of supplies could be available on a case by case need)

FOR OFFICE USE ONLY:

Date recd. _____	Date Processed _____
Status _____	Appointment made for _____
Assigned to _____	Job Start date _____
Completed date _____	file closed by _____ Date _____



VOLUNTEER APPLICATION

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NAME _____ DATE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE _____ CELL _____ E-MAIL _____

Preferred contact method _____ Best time to reach _____

VOLUNTEER ACTIVITIES		CHECK ALL THAT APPLY:	
Team Leader	<input type="checkbox"/>	Gardening	<input type="checkbox"/>
Handyman Assistant	<input type="checkbox"/>	Weatherization	<input type="checkbox"/>
Painting	<input type="checkbox"/>	Clean Ups	<input type="checkbox"/>
Plumbing	<input type="checkbox"/>	Electrical	<input type="checkbox"/>
Carpentry	<input type="checkbox"/>	Estimating	<input type="checkbox"/>
Outreach	<input type="checkbox"/>	Fundraising	<input type="checkbox"/>
Administrative	<input type="checkbox"/>	Other	<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>

How often would you like to volunteer? _____ What days and hours are best for you? _____

Are you able to handle jobs that require lifting and bending? _____

PLEASE CHECK ALL THAT APPLY			
Current Arizona Drivers License	<input type="checkbox"/>	Current AZ Commercial DL	<input type="checkbox"/>
Licensed	<input type="checkbox"/>	Insured	<input type="checkbox"/>
Bonded	<input type="checkbox"/>	Trailer	<input type="checkbox"/>
Truck	<input type="checkbox"/>	SUV	<input type="checkbox"/>
Tools	<input type="checkbox"/>	Bi-lingual	<input type="checkbox"/>
other	<input type="checkbox"/>	other	<input type="checkbox"/>
other	<input type="checkbox"/>	other	<input type="checkbox"/>

Do you hold any specialized certifications or licenses? If yes which? _____

*** Please include legible copy of photo ID & copy of contractors license / resume if applicable**

In case of emergency: Name _____ Relationship _____

Day phone _____ Evening Phone _____ Cell _____

Address _____ City _____ State _____ Zip _____

Signature _____ Date _____

Printed name _____